



2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2004 8:00 am
Secretary of State

04-06-2004 90023 013 ***158.75

DOCUMENT # P03000071258 1. Entity Name ITS DEVELOPMENT, INC.					
Principal Place of Business 19 RIBERIA ST STA AUGUSTINE FL 32084				Mailing Address 19 RIBERIA ST STA AUGUSTINE FL 32084	
2. Principal Place of Business 240 N. Serenata Drive Suite, Apt. #, etc. VILLA # 823		3. Mailing Address 240 N. Serenata Drive Suite, Apt. #, etc. VILLA # 823			
City & State South Ponte Vedra, FL Zip 32082		City & State South Ponte Vedra, FL Zip 32082		4. FEI Number 90-0147575	
Country ST. Johns		Country ST. Johns		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOLES, JOSEPH L JR. 19 RIBERIA ST STA AUGUSTINE FL 32084				7. Name and Address of New Registered Agent Name TISHIA ENDERS Street Address (P.O. Box Number is Not Acceptable) 240 North Serenata Drive VILLA # 823 City South Ponte Vedra Beach FL Zip Code 32082	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Tishia Enders as President of ITS Development Inc</u> 3-28-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOLES, JOSEPH L JR. 19 RIBERIA ST STA AUGUSTINE FL 32084	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director / President TISHIA ENDERS 240 North Serenata Drive VILLA # 823 South Ponte Vedra Beach, FL 32082	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Tishia Enders</u> <u>TISHIA ENDERS</u> 3-28-04 904616-1002 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					